

PRINTER RUSH

(PTO ASSISTANCE)

JFW

Application : <u>10/768553</u>	Examiner : <u>Fulton</u>	GAU : <u>2859</u>
From : <u>TW</u>	Location : IDC FMF <u>FDC</u>	Date : <u>6-24-05</u>
Tracking # : <u>6088378</u>		Week Date : <u>3-21-05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input checked="" type="checkbox"/> OATH	<u>2-2-04</u>	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE:

The file is not assigned and on the oath dated 2-2-04 the 3rd Applicant "Boerhaert" does not show a P.O. Address which is required for printing purposes. Please provide a street Address

Thank Ya
TW

[XRUSH] RESPONSE:

20303 Danville, AMH
Danville, VA 43014

INITIALS:

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04

[Handwritten signature]

[Handwritten signature]



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6571

SERIAL NUMBER 10/768,553	FILING OR 371(c) DATE 02/02/2004 RULE	CLASS 116	GROUP ART UNIT 2859	ATTORNEY DOCKET NO. CMB845	
APPLICANTS Robert A. Staats, Danville, OH; Kevin T. Staats, Danville, OH; Brandon T. Boeshart, Danville, OH;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 04/30/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY OH	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
ADDRESS 34356					
TITLE FLAG SUPPORT ASSEMBLY					
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		